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PTO/SB/05 (4/98)

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	1258-017B
	First Inventor or Application Identifier	
	Michael Catt, et al	
Title	Fertility Computing System and Method	
Express Mail Label No.	EL467164418US	

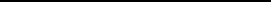
APPLICATION ELEMENTS		ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
See MPEP chapter 600 concerning utility patent application contents.			
1.	<input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2.	<input checked="" type="checkbox"/> Specification [Total Pages 26] (preferred arrangement set forth below)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
	<ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 	a. <input type="checkbox"/> Computer Readable Copy	b. <input type="checkbox"/> Paper Copy (identical to computer copy)
3.	<input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 6]	c. <input type="checkbox"/> Statement verifying identity of above copies	
4.	Oath or Declaration [Total Pages 3]	ACCOMPANYING APPLICATION PARTS	
a.	<input type="checkbox"/> Newly executed (original or copy)	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
b.	<input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)	8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney	
i.	<input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> English Translation Document (if applicable)	
		10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations	
		11. <input type="checkbox"/> Preliminary Amendment	
		12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
		13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired	
		14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
		15. <input checked="" type="checkbox"/> Other: a check for \$ 1,850.00 and \$ 846.00 petition for ext. of	

*** NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Prior application information: Examiner J. Snay Group / Art Unit: 1743
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label <div style="border: 1px dotted black; display: inline-block; width: 200px; height: 1.2em; vertical-align: middle; margin-left: 10px;"></div> or <input checked="" type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i>					
Name	Hopgood, Calimafde, Kalil & Judlowe, L.L.P.				
Address	60 East 42nd Street				
City	New York	State	NY	Zip Code	10165
Country	USA	Telephone	(212) 551-5000	Fax	(212) 949-2795

Name (Print/Type)	Bradley N. Ruben	Registration No. (Attorney/Agent)	32,058
Signature		Date	5 September 2000

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